CONNECTICUT DEPARTMENT OF TRANSPORTATION

FORM: CSO 255 (June 2015)
STATEMENT OF QUALIFICATIONS

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FI	RM INFORMATION AND PROJECT	STAFFING:		
FIRM and YEAR EST.		DBE (Certified by	y CT D	ept. of Transportation)
PARENT CO		SBE (Certified by	y CT D	ept. of Admin. Services)
WORK TO BE DONE AT	PHONE			
ADDRESS	CONTACT			
	E-MAIL			
STATE	E-MAIL ZIP			
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	ZIP	et c) sub-consult a b	ants a	ssigned to this project Traffic Engineers
BY DISCIPLING BY C Administrators Architects	ZIP VE: a) # in firm; b) # in firm assigned to this project a b c Hydrologists Landscape Architects	•		
BY DISCIPLING BY C Administrators Architects Civil Engineers	NE: a) # in firm; b) # in firm assigned to this project a b c Hydrologists Landscape Architects Mechanical Engineers	•		Traffic Engineers
b c Administrators Architects Civil Engineers Construct Inspectors	ZIP NE: a) # in firm; b) # in firm assigned to this project a b c Hydrologists Landscape Architects Mechanical Engineers Planners Urban/Regional	•		Traffic Engineers
BY DISCIPLING Comparison of the comparison of t	ZIP Comparison of Compariso	•		Traffic Engineers
BY DISCIPLIN b c Administrators Architects Civil Engineers Construct Inspectors Draftsmen Ecologists	ZIP VE: a) # in firm; b) # in firm assigned to this project a b c Hydrologists Landscape Architects Mechanical Engineers Planners Urban/Regional Sanitary Engineers Soils Engineers	•		Traffic Engineers
BY DISCIPLING Description Administrators Architects Civil Engineers Construct Inspectors Draftsmen	ZIP Comparison of Compariso	•		Traffic Engineers

Minimum font size allowed is 10 point.

SECTION 'A' - STAFFING Provide a brief summary of the proposed key staff including their qualifications and experience as it pertains to this assignment. You must include their name, title, firm, availability and anticipated role for this assignment. This section may be a maximum of one page.

SECTION 'B' - ORGANIZATIONAL CHART Use a separate page dedicated solely to the organizational structure of personnel for this assignment. Any positions filled by sub-consultants should also be identified within this chart.

SECTION 'C' - QUALIFICATIONS SUMMARY Describe your firm's view relative to the key issues and elements of the project and what your firm's approach will be to completing this assignment. Please provide a narrative which includes the reasons your team is most qualified and best suited to accomplish the desired results. Be sure to address your team's experience in each of the rating criteria from the solicitation letter. This section may be up to four (4) total pages.

SECTION 'D' - PROJECT EXPERIENCE AND QUALIFICATIONS List projects which demonstrate the qualifications of your firm and your proposed staff, relevant to this assignment (Maximum of eight (8) projects – each up to one page in length). Please provide a narrative including project location, description, your firm's scope of work and responsibilities, start/finish dates, project owner, and who from your proposed team were involved and what their role was. Be sure to identify if your firm was the prime or a sub-consultant. Projects performed by sub-consultants proposed on your team may be included as well. These projects should be clearly identified as work experience of the sub-consultant and will count towards the maximum number of projects. List the most recent projects first (based on the start dates).

SECTION 'E' - OTHER DEPARTMENT COMMITMENTS List <u>all</u> current on-going contracts with CT DOT (including those listed in Section D and those as a sub-consultant). Prime contracts should be listed first. List the Project No & Title, Role (prime/sub), and anticipated completion date. Use additional space as necessary.

& T	Fitle, Role (prime/sub), and anticipated completion date. Use additional space as necessary.
1.	Project No. & Title: Role: Anticipated Completion Date:
2.	Project No. & Title: Role: Anticipated Completion Date:
3.	Project No. & Title: Role: Anticipated Completion Date:
	ECTION 'F' - REFERENCES - Provide three (3) project owners (within the past 5 years). Do <u>not</u> include CT DOT resonnel or projects.
1.	Name/Title: Firm/Organization: Phone: Email: Project:
2.	Name/Title: Firm/Organization: Phone: Email: Project:
3.	Name/Title: Firm/Organization: Phone: Email: Project:

SECTION 'G' – RESUMES Key personnel resumes (maximum-2 pages each) should be attached in alphabetical order. FORMAT: Name, Title, Firm, Narrative description of relevant experience and qualifications which correlate to their duties proposed for this assignment, Project Experience (most recent listed first), and Professional Licenses/Registrations.

SECTION 'H' - CERTIFICATIONS AND LICENSES Copies of licenses must be included, if required, per the solicitation letter.

this assignment. Use additional pages as necessary. FIRM ☐ DBE (Certified by CT Dept. of Transportation) ☐ SBE (Certified by CT Dept. of Admin. Services) **ADDRESS** STATE ZIP CITY FEIN CONTACT _____YEAR FIRM ESTABLISHED **PHONE** Ranges of Annual Gross Receipts: (check one) \$100,000 - \$250,000 Less than \$100,000 \$250,000 - \$500,000 \$500,000 - \$1 million \$5 million - \$10 million \$1 million - \$2 million \$2 million - \$5 million \$10 million or greater RESPONSIBILITIES ON THIS PROJECT

SECTION 'I' - PROPOSED SUB-CONSULTANT INFORMATION List all sub-consultants who will participate in